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Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF ILLINOIS		
Case number (if known)	Chapter you are filing under:	
	■ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pai	t 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on	Lilibeth	
	your government-issued picture identification (for example, your driver's	First name	First name
	license or passport).	Middle name	Middle name
	Bring your picture	Hernandez	
	identification to your meeting with the trustee.	Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years		
	Include your married or maiden names.		
3.	Only the last 4 digits of your Social Security number or federal	xxx-xx-5526	
	Individual Taxpayer Identification number (ITIN)		

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Case number (if known)

Debtor 1 Lilibeth Hernandez

About Debtor 1: About Debtor 2 (Spouse Only in a Joint Case): Any business names and **Employer Identification** Numbers (EIN) you have I have not used any business name or EINs. ☐ I have not used any business name or EINs. used in the last 8 years Include trade names and Business name(s) Business name(s) doing business as names EINs EINs If Debtor 2 lives at a different address: Where you live 836 5th St. Aurora, IL 60505 Number, Street, City, State & ZIP Code Number, Street, City, State & ZIP Code Kane County County If your mailing address is different from the one If Debtor 2's mailing address is different from yours, fill it above, fill it in here. Note that the court will send any in here. Note that the court will send any notices to this notices to you at this mailing address. mailing address. Number, P.O. Box, Street, City, State & ZIP Code Number, P.O. Box, Street, City, State & ZIP Code Why you are choosing Check one: Check one: this district to file for bankruptcy Over the last 180 days before filing this petition, I Over the last 180 days before filing this petition, have lived in this district longer than in any other I have lived in this district longer than in any district. other district. I have another reason. I have another reason. Explain. (See 28 U.S.C. § 1408.) Explain. (See 28 U.S.C. § 1408.)

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Case number (if known) Debtor 1 Lilibeth Hernandez

,		Your Bankruptcy Case Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy						
•	The chapter of the Bankruptcy Code you are							
	choosing to file under	■ Chapter 7						
			hapter 11					
		□с	hapter 12					
		□ c	hapter 13					
3.	How you will pay the fee	•	about how yo	u may pay. Ty attorney is sub	pically, if you are paying the fee yo	k with the clerk's office in your local court for more deta urself, you may pay with cash, cashier's check, or mon alf, your attorney may pay with a credit card or check w		
					stallments. If you choose this option to (Official Form 103A).	n, sign and attach the Application for Individuals to Pay		
			I request tha	t my fee be w	aived (You may request this option	n only if you are filing for Chapter 7. By law, a judge ma		
			but is not requapplies to you	uired to, waive Ir family size a	your fee, and may do so only if yound you are unable to pay the fee in	ur income is less than 150% of the official poverty line to installments). If you choose this option, you must fill or ial Form 103B) and file it with your petition.		
).	Have you filed for	■ N	0.					
	bankruptcy within the last 8 years?	□ Ye	es.					
			District		When	Case number		
			District		When	Case number		
			District		When	Case number		
0.	Are any bankruptcy	■ N	0					
	cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	□ Ye	9 S.					
			Debtor			Relationship to you		
			District		When	Case number, if known		
			Debtor			Relationship to you		
			District		When	Case number, if known		
11.	Do you rent your residence?	■ N	Go to li	ne 12.				
	Toolagings !	□ Ye	_{es.} Has yo	ur landlord obt	ained an eviction judgment agains	t you and do you want to stay in your residence?		
				No. Go to line	12.			
				Yes. Fill out Inbankruptcy pe		Judgment Against You (Form 101A) and file it with this		

Debtor 1 Lilibeth Hernandez

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Case number (if known)

Par	Report About Any Bu	sinesses `	You Own	as a Sole Proprie	tor				
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to F	Part 4.					
		☐ Yes.	Name	and location of bus	iness				
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name	of business, if any					
	If you have more than one sole proprietorship, use a separate sheet and attach		Numbe	er, Street, City, Stat	te & ZIP Code				
	it to this petition.		Check	the appropriate bo	x to describe your business:				
				Health Care Busin	ness (as defined in 11 U.S.C. § 101(27A))				
				Single Asset Real	Estate (as defined in 11 U.S.C. § 101(51B))				
				Stockbroker (as d	efined in 11 U.S.C. § 101(53A))				
				Commodity Broke	r (as defined in 11 U.S.C. § 101(6))				
				None of the above					
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	deadlines operation	s. If you inc	dicate that you are www.statement, and f	court must know whether you are a small business debtor so that it can set appropriate a small business debtor, you must attach your most recent balance sheet, statement of ederal income tax return or if any of these documents do not exist, follow the procedure				
	For a definition of small	■ No.	I am no	ot filing under Chap	oter 11.				
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am fil Code.	I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code.					
		☐ Yes.	I am fil	ing under Chapter	11 and I am a small business debtor according to the definition in the Bankruptcy Code.				
Pari	Report if You Own or	Have Any	Hazardoi	is Property or An	y Property That Needs Immediate Attention				
	Do you own or have any		Tiuzui do	as i roperty or An	y Freporty That Reeds infinediate Attention				
1-7.	property that poses or is	No.							
	alleged to pose a threat of imminent and identifiable hazard to	☐ Yes.	What is th	ne hazard?					
	public health or safety? Or do you own any property that needs immediate attention?			ate attention is why is it needed?					
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is	the property?	Number, Street, City, State & Zip Code				

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Debtor 1 Lilibeth Hernandez

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

 □ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

□ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Case number (if known) Lilibeth Hernandez Debtor 1 **Answer These Questions for Reporting Purposes** Part 6: 16. What kind of debts do 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." you have? ☐ No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. ☐ No. Go to line 16c. ☐ Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts 17. Are you filing under I am not filing under Chapter 7. Go to line 18. □ No. Chapter 7? Do you estimate that I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses Yes. after any exempt are paid that funds will be available to distribute to unsecured creditors? property is excluded and administrative expenses No are paid that funds will be available for ☐ Yes distribution to unsecured creditors? 18. How many Creditors do **1**,000-5,000 **1** 25,001-50,000 1-49 you estimate that you **5001-10.000 5**0.001-100.000 **50-99** owe? **1**0,001-25,000 ☐ More than 100,000 **1**00-199 □ 200-999 How much do you □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion **\$0 - \$50,000** estimate your assets to □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion **□** \$50,001 - \$100,000 be worth? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion **\$100,001 - \$500,000** □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500,001 - \$1 million 20. How much do you **\$0 - \$50,000** □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion estimate your liabilities □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion **\$50,001 - \$100,000** to be? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion **\$100,001 - \$500,000** □ \$100.000.001 - \$500 million ■ More than \$50 billion □ \$500,001 - \$1 million Part 7: Sign Below For you I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11. United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Lilibeth Hernandez Signature of Debtor 2 Lilibeth Hernandez Signature of Debtor 1 Executed on Executed on MM / DD / YYYY MM / DD / YYYY

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Debtor 1 Lilibeth Hernandez

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Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ C David Ward	Date
Signature of Attorney for Debtor	MM / DD / YYYY
C David Ward Printed name	
C. David Ward Firm name	
1480 N. Orchard Rd. Ste. 110 Aurora, IL 60506	
Number, Street, City, State & ZIP Code	
Contact phone (630) 585-3164	nail address cdward1945@yahoo.com
Bar number & State	

			711 FAUE 0 01 33	
Fill in this infor	mation to identify your	case:		
Debtor 1	Lilibeth Hernande	ez		
	First Name	Middle Name	Last Name	
Debtor 2				
Spouse if, filing)	First Name	Middle Name	Last Name	
Jnited States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				
if known)				Check if this is a amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

Par	1: Summarize Your Assets		
		Your as	ssets f what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	0.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	7,250.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	7,250.00
Par	2: Summarize Your Liabilities		
			abilities t you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	0.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	76,132.39
	Your total liabilities	\$	76,132.39
Par	3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	2,955.35
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	2,788.00
Par	4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ır other sch	nedules.
7.	■ Yes What kind of debt do you have?		
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a	a personal,	family, or

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

the court with your other schedules.

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8.	From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form
	122A-1 Line 11; OR , Form 122B Line 11; OR , Form 122C-1 Line 14.

3,860.39 \$

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total	claim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	32,093.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	32,093.00

Fill in t			Document	Page 10 of 53		
	this information	to identify your	case and this filing:			
Debtor	1 LiI	ibeth Hernand	e7			
20210.		t Name	Middle Name	Last Name		
Debtor						
(Spouse,	if filing) First	t Name	Middle Name	Last Name		
United	States Bankrupt	cy Court for the:	NORTHERN DISTRICT OF ILL	INOIS		
Case n	umber			_		☐ Check if this is an
						amended filing
Offic	ial Form	106A/B				
_		/B: Prop	ortv			40/45
		-				12/15
hink it fi nformat Answer (its best. Be as co ion. If more space every question.	omplete and accura e is needed, attach	ne items. List an asset only once. It ate as possible. If two married peop a separate sheet to this form. On the separate sheet to this form.	ole are filing together, both ar the top of any additional page	e equally responsible for ຣເ	pplying correct
Part 1:	Describe Each R	tesidence, Building	g, Land, or Other Real Estate You C	Own or Have an Interest In		
l. Do yo	ou own or have an	y legal or equitable	e interest in any residence, buildin	g, land, or similar property?		
■ No	o. Go to Part 2.					
☐ Ye	s. Where is the pro	operty?				
Part 2:	Describe Your V	ehicles				
	4 4		tilituu vahialaa maatanavalaa			
3. Cars □ No ■ Ye)	tractors, sport ut	tility vehicles, motorcycles			
□ No ■ Ye	o es	tractors, sport ut			Do not deduct secured c	aims or exemptions. Put
□ No ■ Ye	o es _{Make:} Kia	.,	Who has an interest in t	the property? Check one	Do not deduct secured of the amount of any secure	ed claims on Schedule D:
□ No ■ Ye 3.1	o es Make: Kia Model: Optim	.,	Who has an interest in t	the property? Check one	the amount of any secure Creditors Who Have Class	ed claims on Schedule D: Ims Secured by Property.
□ No ■ Ye 3.1	Make: Kia Model: Optim Year: 2013	na	Who has an interest in t □ □ Debtor 1 only □ □ Debtor 2 only		the amount of any secure Creditors Who Have Clar Current value of the	ed claims on Schedule D: ims Secured by Property. Current value of the
□ No ■ Ye 3.1	Make: Kia Model: Optim Year: 2013 Approximate milear	na	Who has an interest in to the delivery of the	2 only	the amount of any secure Creditors Who Have Class	ed claims on Schedule D: Ims Secured by Property.
□ No ■ Ye 3.1	Make: Kia Model: Optim Year: 2013 Approximate milear Other information:	na ge: with father, Jo	Who has an interest in t □ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 ■ At least one of the del	2 only btors and another	the amount of any secure Creditors Who Have Clar Current value of the	ed claims on Schedule D: ims Secured by Property. Current value of the
3.1 I I I I I I I I I I I I I I I I I I I	Make: Kia Model: Optim Year: 2013 Approximate milear Other information: Owned jointly Hernandez. Fleercraft, aircraft, Inples: Boats, trail Oes I the dollar values you have atta	with father, Jo MV \$10,000 motor homes, A lers, motors, perso e of the portion s ached for Part 2.	Who has an interest in to Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 at least one of the delegate Deed Check if this is composed in the delegate Deed Check if the	2 only btors and another munity property nicles, other vehicles, and snowmobiles, motorcycle ac	the amount of any secure Creditors Who Have Clai Current value of the entire property? \$5,000.00 accessories cessories	d claims on Schedule D: ms Secured by Property. Current value of the portion you own?

6. **Household goods and furnishings** *Examples:* Major appliances, furniture, linens, china, kitchenware

☐ No

Official Form 106A/B Schedule A/B: Property

	Case 16-05093	Doc 1	Filed 02/17/16		Desc Main
Debtor 1	Lilibeth Hernandez		Document	Page 11 of 53 Case number (if known)	
■ Yes.	Describe				
	Housel	hold goods	and furnishings.		\$600.00
7. Electroi	nics				
Example				oment; computers, printers, scanners; music	collections; electronic devices
■ No □ Yes.	Describe				
Example	ibles of value les: Antiques and figurines; other collections, memo			oks, pictures, or other art objects; stamp, coir	n, or baseball card collections;
■ No □ Yes.	Describe				
	ent for sports and hobbie les: Sports, photographic, e musical instruments		other hobby equipment;	bicycles, pool tables, golf clubs, skis; canoes	and kayaks; carpentry tools;
	Describe				
10. Firearr Exam _l ■ No	ms ples: Pistols, rifles, shotgun:	s, ammunitio	n, and related equipmen	t	
	Describe				
□ No	ples: Everyday clothes, furs	, leather coat	s, designer wear, shoes	, accessories	
_ 100.		g apparel.			\$850.00
		tume jewelry,	engagement rings, wed	ding rings, heirloom jewelry, watches, gems,	gold, silver
■ No □ Yes.	Describe				
	arm animals ples: Dogs, cats, birds, hors	ses			
■ No □ Yes.	Describe				
14. Any ot ■ No	ther personal and househ	old items yo	u did not already list, i	ncluding any health aids you did not list	
	Give specific information				
	the dollar value of all of yo art 3. Write that number h			ny entries for pages you have attached	\$1,450.00
	escribe Your Financial Assets				
Do you ov	wn or have any legal or eq	juitable inter	est in any of the follow	ring ?	Current value of the portion you own? Do not deduct secured claims or exemptions.
☐ No	ples: Money you have in yo			osit box, and on hand when you file your petit	ion
Yes. Official Fori			Schedule A/B: F		page 2

Best Case Bankruptcy

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Case number (if known)

Document Debtor 1 Lilibeth Hernandez

			Cash on hand.	\$200.00
	osits of money mples: Checking, savings, or other financial ar institutions. If you have multiple accou			es, and other similar
■ No	s	Institution name:		
Exa ■ No	ds, mutual funds, or publicly traded stocks mples: Bond funds, investment accounts with substitution or issu	brokerage firms, money market acco	ounts	
19. Non join ■ No	-publicly traded stock and interests in inco t venture s. Give specific information about them	rporated and unincorporated busi		an LLC, partnership, and
Neg Nor ■ No	Name of entity: ernment and corporate bonds and other ne rotiable instruments include personal checks, or regotiable instruments are those you cannot be s. Give specific information about them Issuer name:	cashiers' checks, promissory notes,	and money orders.	
Exa □ No	rement or pension accounts mples: Interests in IRA, ERISA, Keogh, 401(k) s. List each account separately. Type of account:), 403(b), thrift savings accounts, or o	other pension or profit-sharing plans	5
	401(k)	Dreyer Medical 401K		Unknown
You Exa ■ No □ Ye	s	nt, public utilities (electric, gas, water	r), telecommunications companies, dual:	or others
■ No			mber of years)	
24. Inter	Issuer name and description ests in an education IRA, in an account in a S.C. §§ 530(b)(1), 529A(b), and 529(b)(1).		er a qualified state tuition progran	n.
		tion. Separately file the records of ar	ny interests.11 U.S.C. § 521(c):	
■ No	ts, equitable or future interests in property s. Give specific information about them	(other than anything listed in line	1), and rights or powers exercisa	able for your benefit
Exa ■ No			reements	
27. Lice	s. Give specific information about them nses, franchises, and other general intangi mples: Building permits, exclusive licenses, co		or licenses, professional licenses	

Debtor 1 Lilibeth Hernan	Document I	Page 13 of 53 Case number (if known)	Desc Main
☐ Yes. Give specific inform	ation about them		
Money or property owed to yo	ou?		Current value of the portion you own? Do not deduct secured claims or exemptions.
28. Tax refunds owed to you ☐ No ☐ Yes. Give specific information	ation about them, including whether you alread	dy filed the returns and the tax years	
	Possible income tax refur	nd.	\$600.00
■ No □ Yes. Give specific informa 30. Other amounts someone Examples: Unpaid wages,			
☐ Yes. Give specific inform	ation		
31. Interests in insurance poli Examples: Health, disability □ No	cies v, or life insurance; health savings account (HS)	SA); credit, homeowner's, or renter's insura	nce
■ Yes. Name the insurance	company of each policy and list its value. Company name:	Beneficiary:	Surrender or refund value:
	Term life insurance policy through employer. No cash value.		\$0.00
	nat is due you from someone who has died a living trust, expect proceeds from a life insu		eive property because
	es, whether or not you have filed a lawsuit oyment disputes, insurance claims, or rights to a		
34. Other contingent and unli ■ No □ Yes. Describe each claim	quidated claims of every nature, including	counterclaims of the debtor and rights to	o set off claims
35. Any financial assets you o ■ No □ Yes. Give specific inform	•		
	II of your entries from Part 4, including any		\$800.00
Part 5: Describe Any Business-I	Related Property You Own or Have an Interest In.	List any real estate in Part 1.	

Official Form 106A/B Schedule A/B: Property page 4

	Case 16-0509	3 Doc 1	Filed 02/17/16 Document	Entered 0 Page 14 of	2/17/16 15:24:37 53	Desc Main
Debtor	Lilibeth Hernande	Z			Case number (if known)	
37. Do y	you own or have any legal or e	equitable interest	in any business-related p	roperty?		
■ No	o. Go to Part 6.					
☐ Ye	es. Go to line 38.					
Part 6:	Describe Any Farm- and Cor If you own or have an interest			n or Have an Interes	st In.	
46. Do	you own or have any lega	ıl or equitable i	nterest in any farm- or	commercial fishir	ng-related property?	
	No. Go to Part 7.				.g .c.a.ca p.opcy.	
	Yes. Go to line 47.					
Part 7:	Describe All Property Y	ou Own or Have	an Interest in That You Did	d Not List Above		
50 D a		.f	did not almos du lista			
	you have other property on camples: Season tickets, cou		_			
	•	,				
■ Y	es. Give specific information	n				
	<u> </u>	/. I P . / . I .				
	1		on schedule B are the ue in a liquidation sa		ors' best estimate of	\$0.00
		un market var	ao in a nquidation o	410.		<u> </u>
54. A	dd the dollar value of all o	of your entries f	rom Part 7. Write that n	umber here		\$0.00
Part 8:	List the Totals of Each P	art of this Form				
55. P a	art 1: Total real estate, line	e 2				\$0.00
	art 2: Total vehicles, line 5			\$5,000.00		
57. P a	art 3: Total personal and h	nousehold item	s, line 15	\$1,450.00		
58. P a	art 4: Total financial asset	s, line 36	<u> </u>	\$800.00		
59. P a	art 5: Total business-relate	ed property, lin	e 45	\$0.00		
60. P a	art 6: Total farm- and fishi	ng-related prop	erty, line 52	\$0.00		
61. P a	art 7: Total other property	not listed, line	54 +	\$0.00		
62. T o	otal personal property. Ad	d lines 56 throug	gh 61	\$7,250.00	Copy personal property to	stal \$7,250.00
63. T o	otal of all property on Sch	edule A/B. Add	line 55 + line 62			\$7,250.00

Official Form 106A/B Schedule A/B: Property page 5

		DOM:		
Fill in this infor	rmation to identify your	case:		
Debtor 1	Lilibeth Hernand	ez		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States B	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				

Official Form 106C

Schedule C: The Property You Claim as Exempt

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1:	Identify	the l	Property	You	Claim	as	Exemp
I all I.	IUCIIIIV	เมเซา	IODEILV	ı ou	Ciaiiii	aэ	LVCIIID

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
 - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

	-			
Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim		Specific laws that allow exemption
	Copy the value from Schedule A/B	Che	ck only one box for each exemption.	
2013 Kia Optima Owned jointly with father, Jose	\$5,000.00		\$2,400.00	735 ILCS 5/12-1001(c)
Hernandez. FMV \$10,000 Line from Schedule A/B: 3.1			100% of fair market value, up to any applicable statutory limit	
2013 Kia Optima Owned jointly with father, Jose	\$5,000.00		\$2,600.00	735 ILCS 5/12-1001(b)
Hernandez. FMV \$10,000 Line from Schedule A/B: 3.1			100% of fair market value, up to any applicable statutory limit	
Household goods and furnishings.	\$600.00		\$600.00	735 ILCS 5/12-1001(b)
Ellio II oli odilodalo 772. di I			100% of fair market value, up to any applicable statutory limit	
Wearing apparel. Line from Schedule A/B: 11.1	\$850.00		\$850.00	735 ILCS 5/12-1001(a)
Ellie Hoff Golfeddie 742.			100% of fair market value, up to any applicable statutory limit	
Cash on hand. Line from Schedule A/B: 16.1	\$200.00		\$200.00	735 ILCS 5/12-1001(b)
			100% of fair market value, up to any applicable statutory limit	

Case 16-05093 Filed 02/17/16 Entered 02/17/16 15:24:37 Document Page 16 of 53 Debtor 1 Lilibeth Hernandez Case number (if known) Brief description of the property and line on Current value of the Amount of the exemption you claim Specific laws that allow exemption Schedule A/B that lists this property portion you own Copy the value from Check only one box for each exemption. Schedule A/B Possible income tax refund. 735 ILCS 5/12-1001(b) \$600.00 \$600.00 Line from Schedule A/B: 28.1 100% of fair market value, up to any applicable statutory limit 3. Are you claiming a homestead exemption of more than \$155,675? (Subject to adjustment on 4/01/16 and every 3 years after that for cases filed on or after the date of adjustment.) Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?

Doc 1

Yes

Desc Main

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Fill in this information to identify your case:						
Debtor 1	Lilibeth Hernande	ez				
	First Name	Middle Name	Last Name			
Debtor 2						
(Spouse if, filing)	First Name	Middle Name	Last Name			
United States Bankruptcy Court for the:		NORTHERN DISTRICT	OF ILLINOIS			
Case number				☐ Check if this is an		
(amended filing		

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

- 1. Do any creditors have claims secured by your property?
 - No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below.

	Od30 10 00000 B	Document Pa	ae 18 of 53	24.07 B000 Main			
Fill in	this information to identify your ca						
Debto	r 1 Lilibeth Hernandez						
	First Name	Middle Name Last	Name	-			
Debto	r 2 e if, filling) First Name	Middle Name Last	Name	-			
		NORTHERN DISTRICT OF ILLINOI					
Office	d States Bankruptcy Court for the:	NORTHERN DISTRICT OF ILLINOR	3	-			
Case i	number			D Object Williams			
(II KNOWI	n)			☐ Check if this is an amended filing			
	ial Form 106E/F						
Sche	edule E/F: Creditors Wh	o Have Unsecured Cla	ims	12/15			
Schedu Schedu left. Atta name a	tle G: Executory Contracts and Unexpire tile D: Creditors Who Have Claims Secure ach the Continuation Page to this page. and case number (if known).	d Leases (Official Form 106G). Do not ed by Property. If more space is neede If you have no information to report in	include any creditors with partia d, copy the Part you need, fill it o	/B: Property (Official Form 106A/B) and on ally secured claims that are listed in out, number the entries in the boxes on the the top of any additional pages, write your			
Part 1							
_	any creditors have priority unsecured o	claims against you?					
	No. Go to Part 2.						
□ Part 2	Yes. List All of Your NONPRIORITY	Unecoured Claims					
	any creditors have nonpriority unsecur						
_	No. You have nothing to report in this part	<u> </u>	thar echadulas				
		. Submit this form to the court with your o	iller scriedules.				
	Yes.						
un: tha	st all of your nonpriority unsecured clair secured claim, list the creditor separately for an one creditor holds a particular claim, list art 2.	or each claim. For each claim listed, ident	ify what type of claim it is. Do not li	ist claims already included in Part 1. If more			
				Total claim			
4.1	Atg Credit	Last 4 digits of account r	umber <u>7268</u>	\$746.00			
	Nonpriority Creditor's Name 1700 W Cortland St Ste 2	When was the debt incur	red? Opened 4/01/15				
	Chicago, IL 60622 Number Street City State Zlp Code	As of the date you file th	e claim is: Check all that apply				
	Who incurred the debt? Check one.	As of the date you me, th	e claim is. Oneok an that apply				
	Debtor 1 only	☐ Contingent					
	Debtor 2 only	Unliquidated					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	\square At least one of the debtors and anoth	er Type of NONPRIORITY un	nsecured claim:				
	☐ Check if this claim is for a commu	_					
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce the report as priority claims					
	No	<u>-</u> ' ' '	fit-sharing plans, and other similar	debts			
		Colle	ction Attorney Empact E				
	☐ Yes	Other. Specify Phys	icians L	: J,			

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Debt	or 1 Lilibeth Hernandez		Case number (if know)				
4.2	Atg Credit	Last 4 digits of account number	7267	\$644.00			
	Nonpriority Creditor's Name 1700 W Cortland St Ste 2	When was the debt incurred?	Opened 4/01/15				
	Chicago, IL 60622 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply				
	■ Debtor 1 only	☐ Contingent					
	Debtor 2 only	Unliquidated					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:				
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	☐ Obligations arising out of a sep report as priority claims	aration agreement or divorce that you did not				
	■ No	Debts to pension or profit-shari	ng plans, and other similar debts				
	Yes	■ Other. Specify Collection Physicians	Attorney Empact Emergency				
4.3	Atg Credit	Last 4 digits of account number	7269	\$594.00			
	Nonpriority Creditor's Name 1700 W Cortland St Ste 2 Chicago, IL 60622	When was the debt incurred?	Opened 4/01/15				
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply				
	Who incurred the debt? Check one.	_					
	Debtor 1 only	☐ Contingent					
	Debtor 2 only	Unliquidated					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	\square At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:				
	\square Check if this claim is for a community	Student loans					
	debt Is the claim subject to offset?	report as priority claims	aration agreement or divorce that you did not				
	■ No	☐ Debts to pension or profit-shari	ng plans, and other similar debts				
	Yes	■ Other. Specify Collection Physicians	Attorney Empact Emergency L				
4.4	Atg Credit	Last 4 digits of account number	7279	\$455.00			
	Nonpriority Creditor's Name 1700 W Cortland St Ste 2 Chicago, IL 60622	When was the debt incurred?	Opened 4/01/11				
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply				
	Debtor 1 only	☐ Contingent					
	Debtor 2 only	Unliquidated					
	Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:					
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims					
	■ No	Debts to pension or profit-sharing plans, and other similar debts					
	Yes	Other. Specify Consultant	Attorney Valley Imaging				

Document Page 20 of 53 Debtor 1 Lilibeth Hernandez Case number (if know) 4.5 \$455.00 **Atq Credit** Last 4 digits of account number 3595 Nonpriority Creditor's Name 1700 W Cortland St Ste 2 When was the debt incurred? Opened 12/01/14 Chicago, IL 60622 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts **Collection Attorney Valley Imaging** Other. Specify Consultants ☐ Yes **Atg Credit** 4.6 \$425.00 Last 4 digits of account number 5574 Nonpriority Creditor's Name 1700 W Cortland St Ste 2 When was the debt incurred? Opened 11/01/11 Chicago, IL 60622 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not debt Is the claim subject to offset? report as priority claims ■ No $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts Collection Attorney Valley Imaging ☐ Yes Other. Specify Consultants 4.7 Atg Credit Last 4 digits of account number 5991 \$149.00 Nonpriority Creditor's Name 1700 W Cortland St Ste 2 When was the debt incurred? Opened 1/01/15 Chicago, IL 60622 As of the date you file, the claim is: Check all that apply Number Street City State Zlp Code Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only Debtor 2 only Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims \square Debts to pension or profit-sharing plans, and other similar debts ■ No

☐ Yes

Other. Specify Consultants

Collection Attorney Valley Imaging

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Case number (if know)

DCDIO	Lilibetti Herrianuez		Case Humber (II know)	
4.8	Cda/pontiac	Last 4 digits of account number	9246	\$726.00
	Nonpriority Creditor's Name Attn:Bankruptcy Po Box 213	When was the debt incurred?	Opened 4/01/15	
	Streator, IL 61364 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	☐ Yes	Other Specify Collection	Attorney Assoc. Pathologists Of	
4.9	Credit Collections Svc Nonpriority Creditor's Name	Last 4 digits of account number	7740	\$108.00
	Po Box 773	When was the debt incurred?		
	Needham, MA 02494 Number Street City State Zlp Code	As of the date you file, the claim	s: Check all that apply	
	Who incurred the debt? Check one.	_		
	Debtor 1 only	Contingent		
	☐ Debtor 2 only	Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt	☐ Student loans		
	Is the claim subject to offset?	Obligations arising out of a separe report as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	☐ Yes	Other Specify 06 Progres	sive Insurance Company	
4.1	Diversified Svs Group	Last 4 digits of account number	3846	\$11,498.00
	Nonpriority Creditor's Name			·
	Attention: Bankruptcy Department 1824 W Grand Ave - Suite 200 Chicago, IL 60622	When was the debt incurred?		
	Number Street City State Zlp Code	As of the date you file, the claim	s: Check all that apply	
	Who incurred the debt? Check one.			
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharin	g plans, and other similar debts	
	☐ Yes		ush Copley Medical Center	
	LI TES	Other Specify Wicu i UZ Kt	ion copicy wiculdd Gelllei	

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Case number (if know)

Jebu	Linbeth Hernandez	Case number (il know)	
1.1 1	Diversified Svs Group	Last 4 digits of account number 1766	\$6,752.00
	Nonpriority Creditor's Name Attention: Bankruptcy Department 1824 W Grand Ave - Suite 200 Chicago, IL 60622	When was the debt incurred?	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Med1 02 Rush Copley Medical Center	
4.1	Diversified Svs Group	Last 4 digits of account number 8122	\$2,453.00
<u> </u>	Nonpriority Creditor's Name		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	Attention: Bankruptcy Department 1824 W Grand Ave - Suite 200 Chicago, IL 60622	When was the debt incurred?	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	■ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Med1 02 Rush Copley Medical Center	
4.1	Diversified Svs Group	Last 4 digits of account number 4420	\$2,172.00
)	Nonpriority Creditor's Name		, , , ,
	Attention: Bankruptcy Department 1824 W Grand Ave - Suite 200 Chicago, IL 60622	When was the debt incurred?	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	Unliquidated	
	☐ Debtor 1 and Debtor 2 only	Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Πvos	■ ou ou Med1 02 Rush Conley Medical Center	

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Debto	Lilibeth Hernandez		Case number (# know)			
4.1	Diversified Svs Group	Last 4 digits of account number	3816	\$858.00		
	Nonpriority Creditor's Name Attention: Bankruptcy Department 1824 W Grand Ave - Suite 200 Chicago, IL 60622	When was the debt incurred?				
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply			
	Debtor 1 only	☐ Contingent				
	☐ Debtor 2 only	Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	\square At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:			
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not			
	■ No	Debts to pension or profit-sharir	ng plans, and other similar debts			
	Yes	Other. Specify Med1 02 Ru	ush Copley Medical Center			
4.1 5	Diversified Svs Group	Last 4 digits of account number	5563	\$500.00		
	Nonpriority Creditor's Name Attention: Bankruptcy Department 1824 W Grand Ave - Suite 200 Chicago, IL 60622	When was the debt incurred?				
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply			
	Debtor 1 only	☐ Contingent				
	☐ Debtor 2 only	Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	\square At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:			
	Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts			
	Yes	Other. Specify Med1 02 Ru	ush Copley Medical Center			
4.1	Diversified Svs Group	Last 4 digits of account number	4618	\$500.00		
	Nonpriority Creditor's Name Attention: Bankruptcy Department 1824 W Grand Ave - Suite 200	When was the debt incurred?				
	Chicago, IL 60622 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply			
	Debtor 1 only	☐ Contingent				
	Debtor 2 only					
	☐ Debtor 1 and Debtor 2 only	Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:			
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not			
	No	☐ Debts to pension or profit-sharir	g plans, and other similar debts			
	☐ Yes		ush Copley Medical Center			
		Outon Opcomy	• •			

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Debtor 1 Lilibeth Hernandez Case number (if know) 4.1 **Diversified Svs Group** 0745 \$75.00 Last 4 digits of account number Nonpriority Creditor's Name **Attention: Bankruptcy Department** When was the debt incurred? 1824 W Grand Ave - Suite 200 Chicago, IL 60622 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only Debtor 2 only Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Med1 02 Rush Copley Medical Center ☐ Yes 4.1 **Ecmc** 0002 \$3,585.00 Last 4 digits of account number 8 Nonpriority Creditor's Name Opened 1/01/11 1 Imation Place When was the debt incurred? Bldg 2 Oakdale, MN 55128 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: At least one of the debtors and another Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ☐ Other. Specify **Educational Carnegie Ins Comp** 4.1 \$621.00 **Ecmc** 0001 Last 4 digits of account number Nonpriority Creditor's Name 1 Imation Place When was the debt incurred? Opened 1/01/11 Bldg 2 Oakdale, MN 55128 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another Student loans ☐ Check if this claim is for a community debt $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Other. Specify ☐ Yes

Official Form 106 E/F

Educational Carnegie Ins Comp

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Debtor 1 Lilibeth Hernandez Case number (if know) 4.2 Markoff Law LLC \$14,929.39 Last 4 digits of account number 0 Nonpriority Creditor's Name 29 N. Wacker Dr., #550 When was the debt incurred? Chicago, IL 60606 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only Debtor 2 only Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No Collections for Lewis University. Case ☐ Yes Other. Specify number 16 AR 19 4.2 \$27,887.00 Navient 7256 Last 4 digits of account number Nonpriority Creditor's Name Opened 7/01/06 Last Active Attn: Claims Dept Po Box 9500 7/31/10 When was the debt incurred? Wilkes-Barr, PA 18773 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not debt Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ☐ Other. Specify Educational Part 3: List Others to Be Notified About a Debt That You Already Listed 5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page. Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? **Northstar Location Services** Line 4.21 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims 428 Genesee St. Part 2: Creditors with Nonpriority Unsecured Claims Cheektowaga, NY 14225-1943 Last 4 digits of account number On which entry in Part 1 or Part 2 did you list the original creditor? Name and Address Transworld Systems Line 4.18 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims 507 Prudential Rd. Part 2: Creditors with Nonpriority Unsecured Claims Horsham, PA 19044 Last 4 digits of account number On which entry in Part 1 or Part 2 did you list the original creditor? Name and Address **Transworld Systems** Line 4.19 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims 507 Prudential Rd. ■ Part 2: Creditors with Nonpriority Unsecured Claims Horsham, PA 19044 Last 4 digits of account number

Part 4: Add the Amounts for Each Type of Unsecured Claim

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Debtor 1 Lilibeth Hernandez

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				7	otal Claim
	6a.	Domestic support obligations	6a.	\$	0.00
Total					
claims from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	0.00
				7	otal Claim
	6f.	Student loans	6f.	\$	32,093.00
Total claims					
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	44,039.39
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	76,132.39

			111 1 11111. 21 111 1	
Fill in this infor	rmation to identify your	case:		
Debtor 1	Lilibeth Hernand	ez		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				☐ Check if this is an
				amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	company wit Name, Numb	h whom you have the er, Street, City, State and ZIP C	contract or lease	State what the contract or lease is for
2.1					
	Name				
	Number	Street			_
	City		State	ZIP Code	_
2.2					_
	Name				
	Number	Street			_
	City		State	ZIP Code	
2.3			Otato		
	Name				
	Number	Street			_
	City		State	ZIP Code	_
2.4					
	Name				_
	Number	Street			
	City		State	ZIP Code	_
2.5	•				
	Name				_
	Number	Street			_
	City		State	ZIP Code	_
	Jity		Oldio		

		Docume	ent Pade 28 d	DT 53	
Fill in this inf	ormation to identify your				
Debtor 1	Lilibeth Hernand	e <i>7</i>			
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name		
United States	Bankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case number					☐ Check if this is an
. ,					amended filing
Official F	Form 106H				
Schedu	le H: Your Cod	ebtors			12/15
1. Do you No Yes 2. Within Arizona, (No. Go	California, Idaho, Louisiana o to line 3. id your spouse, former spo	you are filing a joint case, you are filing a joint case, or legal equivalent live	do not list either spouse operty state or territor erto Rico, Texas, Wash with you at the time?	r y? (<i>Community property</i> ington, and Wisconsin.)	v states and territories include
Form 106 out Colu	SD), Schedule E/F (Officia mn 2.			06G). Úse Schedule D, 9	e creditor on Schedule D (Official Schedule E/F, or Schedule G to fill
	umn 1: Your codebtor e, Number, Street, City, State and Z	IP Code		Column 2: The cre Check all schedule	ditor to whom you owe the debt s that apply:
24				Ostada Dire	_
3.1 Nam	ne			☐ Schedule D, line ☐ Schedule E/F, line ☐ Schedule D, lin	
				☐ Schedule G, line	
Num	nber Street				
City		State	ZIP Code		
3.2				☐ Schedule D, line	
Nam	ne			Schedule E/F, li	
				☐ Schedule G, line	
Nun	nber Street			_	
City		State	ZIP Code		

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				_			
Fill	in this information to identify your ca	ase:					
Del	btor 1 Lilibeth Heri	nandez					
	btor 2 buse, if filing)						
Uni	ited States Bankruptcy Court for the	: NORTHERN DISTRIC	CT OF ILLINOIS				
	se number nown)					d filing	tpetition chapter ng date:
0	fficial Form 106l			Ī	MM / DD/ Y	YYY	
S	chedule I: Your Inc	ome					12/15
sup spo atta	as complete and accurate as possible plying correct information. If you use. If you are separated and you ch a separate sheet to this form. Describe Employment	are married and not filing wi	ng jointly, and your spouse is livith you, do not include informati	ing with	you, incl t your spo	ude information ouse. If more sp	n about your pace is needed,
1.	Fill in your employment information.		Debtor 1		Debtor 2	or non-filing s	pouse
	If you have more than one job,	Employment status	■ Employed		☐ Emplo	oyed	
	attach a separate page with information about additional	Employment status	☐ Not employed	☐ Not employed			
	employers.	Occupation	Surgical Assistant				
	Include part-time, seasonal, or self-employed work.	Employer's name	Dreyer Medical Clinic				
	Occupation may include student or homemaker, if it applies.	Employer's address	1870 W. Galena Blvd Aurora, IL 60506				
		How long employed the	here? 1		_		
Pai	rt 2: Give Details About Mor	nthly Income					
	mate monthly income as of the dause unless you are separated.	ate you file this form. If	you have nothing to report for any	line, writ	e \$0 in the	space. Include	your non-filing
	ou or your non-filing spouse have mo e space, attach a separate sheet to		ombine the information for all emp	oyers for	that perso	n on the lines b	elow. If you need
				For De	btor 1	For Debtor 2 non-filing sp	
2.	List monthly gross wages, sala deductions). If not paid monthly,			3	3,860.30	\$	N/A
3.	Estimate and list monthly overt	ime pay.	3. +\$		0.00	+\$	N/A

Calculate gross Income. Add line 2 + line 3.

3,860.30

N/A

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Debt	or 1	Lilibeth Hernandez	-	(Case r	number (<i>if k</i>	nown)				
					For	Debtor 1			Debtor -filing s	2 or spouse	
	Cop	by line 4 here	4.		\$	3,86	0.30	\$		N/A	<u>\</u>
5.	List	all payroll deductions:									
	5a.	Tax, Medicare, and Social Security deductions	5a	a.	\$	90	4.95	\$		N/A	
	5b.	Mandatory contributions for retirement plans	5b		\$		0.00	\$		N/A	_
	5c.	Voluntary contributions for retirement plans	50) .	\$		0.00	\$		N/A	<u></u>
	5d.	Required repayments of retirement fund loans	50	d.	\$		0.00	\$		N/A	\
	5e.	Insurance	56	€.	\$	(0.00	\$		N/A	<u>\</u>
	5f.	Domestic support obligations	5f		\$		0.00	\$		N/A	
	5g.	Union dues	50		\$		0.00	\$		N/A	_
	5h.	Other deductions. Specify:	_ 5r	1.+	\$	(0.00	+ \$		N/A	_
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.		\$		4.95	\$		N/A	<u>\</u>
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$	2,95	5.35	\$		N/A	<u>\</u>
8.	List 8a.	t all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total									
		monthly net income.	88	ā.	\$		0.00	\$		N/A	1
	8b.	Interest and dividends	8b).	\$	(0.00	\$		N/A	<u></u>
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	80) .	\$	(0.00	\$		N/A	1
	8d.	Unemployment compensation	80	d.	\$	(0.00	\$		N/A	
	8e.	Social Security	86	€.	\$	(0.00	\$		N/A	<u> </u>
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8f		\$		0.00	\$		N/A	
	8g.	Pension or retirement income	80		\$		0.00	\$		N/A	
	8h.	Other monthly income. Specify:	_ 8h	1.+	\$		0.00	+ \$		N/A	<u>\</u>
9.	Add	d all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	9	§		0.00	\$		N/	Ά
10	Cal	culate monthly income. Add line 7 + line 9.	10.	\$	-	2,955.35	+ \$		N/A	= \$	2,955.35
10.		I the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	Ψ_		.,900.00	🕆		IVA		2,933.33
11.	Star Incli othe Do	te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your er friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not accify:	depe			•				e <i>J</i> . +\$	0.00
12.		If the amount in the last column of line 10 to the amount in line 11. The restet that amount on the Summary of Schedules and Statistical Summary of Certaillies							12.	\$	2,955.35
13.	Do :	you expect an increase or decrease within the year after you file this form	?						'	Combi	ined Ily income
		No.									

Official Form 106I Schedule I: Your Income page 2

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					i		
Fill in this	information to identify yo	ur case:					
Debtor 1	Lilibeth Hern	andez			Check	c if this is:	
Debtor 2					_	An amended filing	ving postpetition chapter
(Spouse, if	filing)						the following date:
United State	es Bankruptcy Court for the:	NORTHER	N DISTRICT OF ILLING	OIS	1	MM / DD / YYYY	
Case numb	er						
(If known)							
Officia	al Form 106J						
	dule J: Your I	Expense	es				12/1
Be as cor	nplete and accurate as on. If more space is ned f known). Answer ever Describe Your House	possible. If t eded, attach a y question.	wo married people ar				
	s a joint case?	noia					
	o. Go to line 2.						
ЦY	es. Does Debtor 2 live i	n a separate	household?				
	☐ No ☐ Yes Debtor 2 mus	t file Official F	orm 106J-2, <i>Expenses</i>	for Separate House	ehold of Debto	or 2	
0 D avi		_	01111 1000 Z, Experiedo	Tor Coparato Frouse	mora or Bobi	31 Z.	
	ou have dependents?	□ No					
Do n Debt	ot list Debtor 1 and or 2.	YAS	out this information for ch dependent	Dependent's relat Debtor 1 or Debto		Dependent's age	Does dependent live with you?
Do n	ot state the						□ No
depe	ndents names.			Daughter		7 mos	Yes
							□ No □ Yes
							□ No
							☐ Yes
							□ No
							☐ Yes
	our expenses include nses of people other the	■ No					
	self and your depender		S				
Part 2:	Estimate Your Ongoin	na Monthly F	ynenses				
Estimate	your expenses as of your expenses as of your expenses as of a date after the k	our bankrupto	y filing date unless y				pter 13 case to report f the form and fill in the
the value	xpenses paid for with r of such assistance and orm 106I.)					Your expe	enses
4. The	rental or home owners	hin expenses	for your residence I	nclude first mortgag	<u> </u>		
	nents and any rent for the		•	lolddo mot mortgag	4. \$		400.00
If no	t included in line 4:						
4a.	Real estate taxes				4a. \$		0.00
4b.	Property, homeowner's	-			4b. \$		0.00
4c. 4d.	Home maintenance, re Homeowner's associati				4c. \$ 4d. \$		0.00
	tional mortgage payme			me equity loans	4u. \$		0.00

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Debtor	1 Lilibeth Hernandez	Case num	ber (if known)	
6. Ut	ilities:			
6a	. Electricity, heat, natural gas	6a.	\$	60.00
6b	. Water, sewer, garbage collection	6b.	\$	0.00
6c	Telephone, cell phone, Internet, satellite, and cable services	6c.	\$	250.00
6d	l. Other. Specify:	6d.	\$	0.00
7. F c	ood and housekeeping supplies	7.	\$	550.00
8. C ł	nildcare and children's education costs	8.	\$	225.00
9. CI	othing, laundry, and dry cleaning	9.	\$	200.00
10. P e	ersonal care products and services	10.	\$	200.00
11. M e	edical and dental expenses	11.	\$	120.00
12. Tr	ansportation. Include gas, maintenance, bus or train fare.		•	252.22
	not include car payments.	12.	\$	350.00
	ntertainment, clubs, recreation, newspapers, magazines, and books	13.	\$	100.00
14. C ł	naritable contributions and religious donations	14.	\$	0.00
-	surance.			
	o not include insurance deducted from your pay or included in lines 4 or 20.	4.5	•	
	a. Life insurance	15a.	· ·	0.00
	b. Health insurance	15b.	·	0.00
	c. Vehicle insurance	15c.	· -	133.00
	d. Other insurance. Specify:	15d.	\$	0.00
	ixes. Do not include taxes deducted from your pay or included in lines 4 or 20.		_	
	pecify:	16.	\$	0.00
	stallment or lease payments:		•	
	a. Car payments for Vehicle 1	17a.	· -	200.00
	b. Car payments for Vehicle 2	17b.	·	0.00
	c. Other. Specify:	17c.		0.00
	d. Other. Specify:	17d.	\$	0.00
	our payments of alimony, maintenance, and support that you did not report as	10	¢.	0.00
	ducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	·	
	ther payments you make to support others who do not live with you.	40	\$	0.00
	pecify:	19.	-	
	ther real property expenses not included in lines 4 or 5 of this form or on Sche			0.00
	la. Mortgages on other property	20a.		0.00
	b. Real estate taxes	20b.		0.00
	c. Property, homeowner's, or renter's insurance	20c.		0.00
	d. Maintenance, repair, and upkeep expenses	20d.	·	0.00
_	e. Homeowner's association or condominium dues	20e.	·	0.00
21. O t	her: Specify:	21.	+\$	0.00
22. C=	alculate your monthly expenses			
	a. Add lines 4 through 21.		\$	2,788.00
	b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	2,100.00
				2 700 22
22	c. Add line 22a and 22b. The result is your monthly expenses.		\$	2,788.00
23. C a	alculate your monthly net income.			
	a. Copy line 12 (your combined monthly income) from Schedule I.	23a.	\$	2,955.35
	b. Copy your monthly expenses from line 22c above.	23b.	·	2,788.00
			·	
	c. Subtract your monthly expenses from your monthly income.			
23	ic. Subtract your monthly expenses noneyour monthly income.	23c.		167.35

24. Do you expect an increase or decrease in your expenses within the year after you file this form?

For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?

☐ No.

Yes.

Explain here: Debtor is currently living with parents. Rent expense will increase significantly when no longer living at home.

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Fill in th	his information	to identify your	case:					
Debtor 1	1 Lil	ibeth Hernande	ez					
		t Name	Middle Name	Las	st Name			
Debtor 2								
(Spouse if,	, filing) Firs	t Name	Middle Name	Las	st Name			
United S	States Bankrupt	cy Court for the:	NORTHERN DISTRIC	T OF ILLINO	IS			
Case nu	ımher							
(if known)								Check if this is an
								amended filing
Officia	al Form 10	<u>6Dec</u>						
Decl	laration	About a	n Individua	I Debt	or's Sche	edules		12/15
								.2,.0
If two ma	arried people a	are filing togethe	r, both are equally response	onsible for s	upplying correct	information.		
			le bankruptcy schedule					
		operty by fraud ii C. §§ 152, 1341, 1	n connection with a ban	ikruptcy cas	e can result in tir	ies up to \$250,0	ou, or impr	isonment for up to 20
, oa. o, o.		5. 33 .02, .0, .	010, 4114 001 11					
	Sign Belo	w						
Dic	d you pay or ag	gree to pay some	one who is NOT an atto	rney to help	you fill out bank	ruptcy forms?		
	No							
П	Yes. Name of	of person				Attach Ban	kruptcv Pe	tition Preparer's Notice,
_								ature (Official Form 119)
Hne	dor nonalty of r	ooriury I doclaro	that I have read the sur	nmary and s	chadulas filad wi	th this doclarati	on and	
	t they are true		that I have read the Sun	illial y allu s	chedules med wi	un uns deciarau	on and	
	-							
Χ.	/s/ Lilibeth F			X	0'	10		
	Lilibeth Herr Signature of D				Signature of Deb	tor 2		
	Signature of D	CDIOI I						
	Date				Date			
					-			

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Eill	in this inform	nation to identify you	r case.			
	tor 1		-			
Den	itor i	Lilibeth Hernand	Middle Name	Last Name		
	tor 2 use if, filing)	First Name	Middle Name	Last Name		
Unit	ed States Bar	kruptcy Court for the:	NORTHERN DISTRICT (DF ILLINOIS		
Cas (if kno	e number				_	Check if this is an mended filing
Sta Be a	s complete a	of Financial	ble. If two married people a		ankruptcy equally responsible for sup	
		i). Answer every ques		uns form. On the top of any	, additional pages, write you	ii iiailie aliu case
Par	Give D	etails About Your Ma	rital Status and Where You	Lived Before		
1.	What is your	current marital statu	ıs?			
	☐ Married■ Not mar	ried				
2.	During the la	ıst 3 years, have you	lived anywhere other than	where you live now?		
	■ No □ Yes. List	t all of the places you l	ived in the last 3 years. Do no	ot include where you live now		
	Debtor 1 Pri	or Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there
					ity property state or territory co, Texas, Washington and W	
	■ No □ Yes. Ma	ke sure you fill out <i>Scl</i>	nedule H: Your Codebtors (O	fficial Form 106H).		
Part	Explain	n the Sources of You	r Income			
	Fill in the tota	I amount of income yo	u received from all jobs and a	ng a business during this yeall businesses, including parter together, list it only once ur		ndar years?
	□ No ■ Yes. Fill	in the details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
		of current year until d for bankruptcy:	■ Wages, commissions, bonuses, tips	\$2,839.54	☐ Wages, commissions, bonuses, tips	
			☐ Operating a business		☐ Operating a business	

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Case number (if known) Debtor 1 Lilibeth Hernandez

			Debtor 1		Debtor 2		
			Sources of income	Gross income	Sources of inco	ome C	ross income
			Check all that apply.	(before deductions and exclusions)	Check all that ap	oply. (b	pefore deductions nd exclusions)
	last calendar year: nuary 1 to December		■ Wages, commissions, bonuses, tips	\$20,283.11	☐ Wages, combonuses, tips	/ages, commissions, ises, tips	
			☐ Operating a business		☐ Operating a l	ousiness	
	the calendar year be nuary 1 to December	21 2014 \	■ Wages, commissions, bonuses, tips	\$0.00	☐ Wages, combonuses, tips	missions,	
			☐ Operating a business		☐ Operating a l	ousiness	
5.	Include income regard and other public bene winnings. If you are fil	dless of whethe fit payments; pe ing a joint case	during this year or the two r that income is taxable. Exa ensions; rental income; inter- and you have income that y ne from each source separat	imples of other income are a est; dividends; money collec- rou received together, list it of	ilimony; child suppo ited from lawsuits; i only once under De	royalties; and ga btor 1.	
	■ No □ Yes. Fill in the de	etails.					
			Dahtan 4		Dahtan 2		
		:	Debtor 1 Sources of income Describe below	Gross income (before deductions and exclusions)	Debtor 2 Sources of inco Describe below.	(b	perfore deductions and exclusions)
	☐ No. Neither D	ebtor 1 nor De	debts primarily consumer btor 2 has primarily consumersonal family or household	imer debts. Consumer debt	s are defined in 11	U.S.C. § 101(8)	as "incurred by an
	□ No. Neither Dindividual During the □ No. □ Yes * Subject	ebtor 1 nor De primarily for a p 90 days before Go to line 7. List below ea paid that cred not include pa to adjustment of	btor 2 has primarily consumersonal, family, or household by you filed for bankruptcy, did characteristics. Do not include payment ayments to an attorney for the pay 4/01/16 and every 3 years	d you pay any creditor a total d a total of \$6,225* or more its for domestic support oblighis bankruptcy case.	I of \$6,225* or mor in one or more pay gations, such as ch	e? ments and the to ild support and a	otal amount you
	□ No. Neither Dindividual □ During the □ No. □ Yes * Subject ■ Yes. Debtor 1 of	ebtor 1 nor De primarily for a p 90 days before Go to line 7. List below ea paid that crec not include p to adjustment cor	btor 2 has primarily consu- ersonal, family, or househole e you filed for bankruptcy, did ch creditor to whom you paid ditor. Do not include payment ayments to an attorney for the	Imer debts. Consumer debt d purpose." d you pay any creditor a total d a total of \$6,225* or more in the for domestic support obligations bankruptcy case. It is after that for cases filed on the file of the fi	I of \$6,225* or mor n one or more pay jations, such as ch or after the date of	e? ments and the to ild support and a adjustment.	otal amount you
	□ No. Neither Dindividual □ During the □ No. □ Yes * Subject ■ Yes. Debtor 1 of During the ■ No.	ebtor 1 nor De primarily for a p 90 days before Go to line 7. List below ea paid that crec not include p to adjustment cor	btor 2 has primarily consustersonal, family, or household by you filed for bankruptcy, did characteristics. Do not include payment ayments to an attorney for the hone 4/01/16 and every 3 years both have primarily consusters.	Imer debts. Consumer debt d purpose." d you pay any creditor a total d a total of \$6,225* or more in the for domestic support obligations bankruptcy case. It is after that for cases filed on the file of the fi	I of \$6,225* or mor n one or more pay jations, such as ch or after the date of	e? ments and the to ild support and a adjustment.	otal amount you
	□ No. Neither Dindividual □ During the □ No. □ Yes * Subject ■ Yes. Debtor 1 of During the	ebtor 1 nor De primarily for a p 90 days before Go to line 7. List below ea paid that cred not include p to adjustment of Dr Debtor 2 or 90 days before Go to line 7. List below ea include paym	btor 2 has primarily consustersonal, family, or household by you filed for bankruptcy, did characteristics. Do not include payment ayments to an attorney for the hone 4/01/16 and every 3 years both have primarily consusters.	d you pay any creditor a total d a total of \$6,225* or more at some danger of the following bankruptcy case. It is after that for cases filed on the following pay any creditor a total d a total of \$600 or more and d a total of \$600 or more and d a total of \$600 or more and d purpose.	I of \$6,225* or more not on one or more pay gations, such as chi or after the date of I of \$600 or more?	e? ments and the to ild support and a adjustment.	otal amount you alimony. Also, do
	□ No. Neither Dindividual □ During the □ No. □ Yes * Subject ■ Yes. Debtor 1 of During the ■ No.	ebtor 1 nor De primarily for a page 90 days before Go to line 7. List below ea paid that cred not include page to adjustment of pr Debtor 2 or 90 days before Go to line 7. List below ea include paymattorney for the	btor 2 has primarily consulersonal, family, or household by you filed for bankruptcy, did ch creditor to whom you paid ditor. Do not include payment ayments to an attorney for the on 4/01/16 and every 3 years both have primarily consuler you filed for bankruptcy, did ch creditor to whom you paid ents for domestic support of	d you pay any creditor a total d a total of \$6,225* or more into the form of t	I of \$6,225* or more not on one or more pay gations, such as chi or after the date of I of \$600 or more?	e? ments and the to ild support and a adjustment.	otal amount you alimony. Also, do ditor. Do not de payments to ar
7.	□ No. Neither Dindividual □ During the □ No. □ Yes * Subject ■ Yes. Debtor 1 of During the ■ No. □ Yes Creditor's Name and Within 1 year before Insiders include your of which you are an of	ebtor 1 nor De primarily for a p 90 days before Go to line 7. List below ea paid that cree not include p to adjustment of For Debtor 2 or 90 days before Go to line 7. List below ea include paym attorney for the d Address you filed for b relatives; any g fficer, director, p	btor 2 has primarily consultersonal, family, or household be you filed for bankruptcy, did characteristic. Do not include payment ayments to an attorney for the on 4/01/16 and every 3 years both have primarily consultery you filed for bankruptcy, did characteristic to whom you paid ents for domestic support of his bankruptcy case.	d you pay any creditor a total d a total of \$6,225* or more atts for domestic support oblighis bankruptcy case. It is after that for cases filed on timer debts. It is a total of \$600 or more and obligations, such as child support of the total of \$600 or more and obligations, such as child support of the total of \$600 or more and obligations, such as child support of the total of \$600 or more and obligations, such as child support of the total of \$600 or more of the total of \$	I of \$6,225* or more not on one or more pay gations, such as chief or after the date of I of \$600 or more? I the total amount your and alimony. A mount you still owe wed anyone who prships of which you as ecurities; and an	e? ments and the to ild support and a adjustment. you paid that cre also, do not inclu Was this payn was an insider' u are a general p y managing age	otal amount you alimony. Also, do ditor. Do not de payments to arment for
7.	□ No. Neither Dindividual □ During the □ No. □ Yes * Subject ■ Yes. Debtor 1 of During the □ No. □ Yes * Subject ■ No. □ Yes Creditor's Name and Within 1 year before Insiders include your of which you are an of a business you operate	ebtor 1 nor Deprimarily for a paragraph of the primarily for a paragraph of the primarily for a paragraph of the paragraph of	btor 2 has primarily consumersonal, family, or household be you filed for bankruptcy, did the creditor to whom you paid the control of the co	d you pay any creditor a total d a total of \$6,225* or more atts for domestic support oblighis bankruptcy case. It is after that for cases filed on timer debts. It is a total of \$600 or more and obligations, such as child support of the total of \$600 or more and obligations, such as child support of the total of \$600 or more and obligations, such as child support of the total of \$600 or more and obligations, such as child support of the total of \$600 or more of the total of \$	I of \$6,225* or more not on one or more pay gations, such as chief or after the date of I of \$600 or more? I the total amount your and alimony. A mount you still owe wed anyone who prships of which you as ecurities; and an	e? ments and the to ild support and a adjustment. you paid that cre also, do not inclu Was this payn was an insider' u are a general p y managing age	otal amount you alimony. Also, do ditor. Do not de payments to an ment for

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8.	Within 1 year before you filed for bankruptoinsider? Include payments on debts guaranteed or cost No		ments or transfer any pro	perty on a	ccount of a do	ebt that benefited an
	☐ Yes. List all payments to an insider					
	Insider's Name and Address	Dates of payment		ount you still owe	Reason for Include cred	this payment itor's name
Pa	rt 4: Identify Legal Actions, Repossession	ns, and Foreclosures				
9.	Within 1 year before you filed for bankrupt List all such matters, including personal injury modifications, and contract disputes.					
	□ No					
	Yes. Fill in the details.					
	Case title Case number	Nature of the case	Court or agency		Status of th	e case
	Lewis University v Lilibeth Arbitration Kane County Circuit Court Hernandez Geneva, IL 16 AR 19				■ Pending □ On appeal □ Concluded	
11.	■ No □ Yes. Fill in the information below. Creditor Name and Address Within 90 days before you filed for bankrup accounts or refuse to make a payment bec ■ No □ Yes. Fill in the details.			Date	ı, set off any a	Value of the property
	Creditor Name and Address	Describe the action the	creditor took	Date taker	action was	Amount
12.	Within 1 year before you filed for bankrupte court-appointed receiver, a custodian, or a ■ No □ Yes		erty in the possession of a	an assigne	e for the bene	efit of creditors, a
Pа	rt 5: List Certain Gifts and Contributions					
13.	Within 2 years before you filed for bankrup ■ No □ Yes. Fill in the details for each gift.	tcy, did you give any gift	s with a total value of mor	e than \$60	0 per person	?
	Gifts with a total value of more than \$600 per person	Describe the gifts		Dates the g	s you gave ifts	Value
	Person to Whom You Gave the Gift and Address:					

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Debte	or 1	Lilibeth Hernandez		Document	- age 37 of c	ase number	(if known)	
ı	– N	n 2 years before you filed for bankr No ⁄es. Fill in the details for each gift or c			gifts or contributions	s with a tota	al value of more than	\$600 to any charity
	Gifts more Char	or contributions to charities that to than \$600 or contributions to charities that to the than \$600 or contributions to charities that the than \$600 or contributions that the thin \$600 or contributions the thin \$600 or contributions that the thin \$600 or contributions the thin \$600 or contributions that the thin \$600 or contributions the	total		you contributed		Dates you contributed	Value
Part	6:	List Certain Losses						
		n 1 year before you filed for bankru mbling?	ptcy or	since you filed fo	or bankruptcy, did ye	ou lose any	thing because of the	ft, fire, other disaster
	_	No ∕es. Fill in the details.						
	Desc	cribe the property you lost and the loss occurred	Include	e the amount that ir	coverage for the lonsurance has paid. Lings of Schedule A/B: F	st pending	Date of your loss	Value of property lost
Part	7.	List Certain Payments or Transfers	e					
[□ N	le any attorneys, bankruptcy petition p No Yes. Fill in the details.	oreparer			·	d in your bankruptcy.	
	Addr Emai	on Who Was Paid ress il or website address on Who Made the Payment, if Not Y	⁄ou	Description and transferred	d value of any prope	erty	Date payment or transfer was made	Amount of payment
	C. D 1480 Auro Auro	avid Ward O N. Orchard Rd. Ste. 110 ora, IL 60506 ora, IL 60506 ard1945@yahoo.com		Attorney Fees	3		5-12-11	\$1,200.00
	372	Debtorcc, Inc. Summit Ave. ey City, NJ 07306					2-16-16	\$15.00
p	oromi Do no	n 1 year before you filed for bankru ised to help you deal with your creat it include any payment or transfer that	ditors o	r to make paymer			or transfer any prope	erty to anyone who

Description and value of any property

transferred

☐ Yes. Fill in the details.

Person Who Was Paid

Address

Amount of

payment

Date payment

made

or transfer was

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Debtor 1 Lilibeth Hernandez

18.	B. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your include gifts and transfers that you have already listed on this statement. No Yes. Fill in the details. Person Who Received Transfer Description and value of Describe any property or							
	Person Who Received Transfer Address Person's relationship to you	Description and v		payment	e any property or ts received or debts exchange	Date transfer was made		
19.	Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.) No Yes. Fill in the details.							
	Name of trust	Description and v	alue of the prop	erty transfe	rred	Date Transfer was made		
Par	t 8: List of Certain Financial Accounts, Inst	ruments, Safe Deposi	t Boxes, and Sto	orage Units				
20.	Within 1 year before you filed for bankruptcy sold, moved, or transferred? Include checking, savings, money market, or houses, pension funds, cooperatives, associated No	other financial accou	nts; certificates	of deposit; s				
	Yes. Fill in the details.							
		Last 4 digits of account number	Type of accou instrument	c n	Date account was losed, sold, noved, or ransferred	Last balance before closing or transfer		
21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposi cash, or other valuables?				sit box or other deposit	ory for securities,			
	■ No □ Yes. Fill in the details.							
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acc Address (Number, S State and ZIP Code)		Describe the	e contents	Do you still have it?		
22.	Have you stored property in a storage unit of	place other than your	home within 1 y	year before y	you filed for bankruptc	y		
	NoYes. Fill in the details.							
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or I to it? Address (Number, S State and ZIP Code)		Describe the	e contents	Do you still have it?		
Par	t 9: Identify Property You Hold or Control f	or Someone Else						
23.	Do you hold or control any property that son for someone.	neone else owns? Incl	ude any propert	y you borrov	ved from, are storing fo	or, or hold in trust		
	■ No □ Yes. Fill in the details.							
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the prop (Number, Street, City, S Code)		Describe the	e property	Value		
Par	t 10: Give Details About Environmental Info	rmation						
For	the purpose of Part 10, the following definitio	ns apply:						

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Debtor 1 Lilibeth Hernandez

toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.

- Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance,

	hazardous material, pollutant, contaminant, or s	similar term.					
Rep	Report all notices, releases, and proceedings that you know about, regardless of when they occurred.						
24.	Has any governmental unit notified you that you	u may be liable or potentially liable	under or in violation of an environme	ental law?			
	■ No □ Yes. Fill in the details.						
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice			
25. Have you notified any governmental unit of any release of hazardous material?							
	■ No □ Yes. Fill in the details.						
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code) Environmental law, if you know it		Date of notice			
26.	Have you been a party in any judicial or adminis	strative proceeding under any envi	ronmental law? Include settlements a	nd orders.			
	■ No □ Yes. Fill in the details.						
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case			
Par	11: Give Details About Your Business or Con	nections to Any Business					
27.	Within 4 years before you filed for bankruptcy, o	did you own a business or have an	y of the following connections to any	business?			
	☐ A sole proprietor or self-employed in a t	•					
	☐ A member of a limited liability company	(LLC) or limited liability partnershi	p (LLP)				
	☐ A partner in a partnership						
	☐ An officer, director, or managing execut	tive of a corporation					
	☐ An owner of at least 5% of the voting or	equity securities of a corporation					
	■ No. None of the above applies. Go to Part	12.					
	Yes. Check all that apply above and fill in the	he details below for each business					
	Business Name Des Address	scribe the nature of the business	Employer Identification number				
		me of accountant or bookkeeper	Do not include Social Security number or ITIN.				
28.	Within 2 years before you filed for bankruptcy, oinstitutions, creditors, or other parties.	did you give a financial statement t	Dates business existed o anyone about your business? Inclu	de all financial			
	■ No						
	Yes. Fill in the details below.						
	Name Address (Number, Street, City, State and ZIP Code)						
_	0						

Part 12: Sign Below

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Debtor 1 Lilibeth Hernandez

are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

/s/ Lilibeth Hernandez	
Lilibeth Hernandez	Signature of Debtor 2
Signature of Debtor 1	
Date	Date
Did you attach additional	ages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?
■ No	
☐ Yes	
Did you pay or agree to pa	someone who is not an attorney to help you fill out bankruptcy forms?
■ No	
☐ Yes. Name of Person	. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

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Debtor 1	Lilibeth Hernand	ez			
	First Name	Middle Name	Last Name		
Debtor 2					
Spouse if, filing)	First Name	Middle Name	Last Name		
United States B	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case number					
if known)				☐ Check	if this is an
					ded filing
					ded filing
Official Fo	orm 108				ded filing
Official Fo		on for Individu	uals Filing Under	amend	Ü
		on for Individu	uals Filing Under	amend	12/15
Stateme	nt of Intentio			amend	J
Stateme	nt of Intentio	pter 7, you must fill out t		amend	J

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1: List Your Creditors Who Have Secured Claims

on the form

1. For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the information below.

Identify the creditor and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C
Creditor's	☐ Surrender the property.	□ No
name:	Retain the property and redeem it.	
Description of	☐ Retain the property and enter into a Reaffirmation Agreement.	☐ Yes
property	☐ Retain the property and [explain]:	
securing debt:		
Creditor's	☐ Surrender the property.	□ No
name:	☐ Retain the property and redeem it.	
Description of	☐ Retain the property and enter into a Reaffirmation Agreement.	☐ Yes
property	☐ Retain the property and [explain]:	
securing debt:		
Creditor's	☐ Surrender the property.	□ No
name:	☐ Retain the property and redeem it.	
Description of	☐ Retain the property and enter into a Reaffirmation Agreement.	☐ Yes
property	☐ Retain the property and [explain]:	
securing debt:		
Creditor's	☐ Surrender the property.	□ No

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

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Debtor 1	Lilibeth Hernandez	Case number (if known)	
name: Descri	otion of	 □ Retain the property and redeem it. □ Retain the property and enter into a Reaffirmation Agreement. 	☐ Yes
proper		Retain the property and [explain]:	
Securii	ig debt.		-
in the info	ormation below. Do not list real estate	ty Leases you listed in Schedule G: Executory Contracts and Unexpired leases. Unexpired leases are leases that are still in effect; the rty lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2	lease period has not yet ended.
Describe	your unexpired personal property lea	ases	Will the lease be assumed?
Lessor's			□ No
Property:	on of leased		☐ Yes
Lessor's	name:		□ No
Description Property:	on of leased		□ Yes
Lessor's	name:		□ No
Description Property:	on of leased		□ Yes
Lessor's	name:		□ No
Description Property:	on of leased		☐ Yes
Lessor's	name:		□ No
Description Property:	on of leased		☐ Yes
Lessor's	name:		□ No
Description Property:	on of leased		☐ Yes
Lessor's	name:		□ No
Description Property:	on of leased		☐ Yes
Part 3:	Sign Below		
Under pe	-	ndicated my intention about any property of my estate that sec	ures a debt and any personal
	_ilibeth Hernandez	x	
	oeth Hernandez lature of Debtor 1	Signature of Debtor 2	
Date	9	Date	

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:		Liquidation
\$24	45	filing fee
\$7	75	administrative fee
+ \$	15	trustee surcharge
\$33	35	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

\$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
•	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
·	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 16-05093 Doc 1 Filed 02/17/16 Entered 02/17/16 15:24:37 Desc Main Document Page 47 of 53

B2030 (Form 2030) (12/15)

United States Bankruptcy Court Northern District of Illinois

In re	Lilibeth Hernandez		Case No.	
		Debtor(s)	Chapter	7
	DISCLOSURE OF	COMPENSATION OF ATTORN	EY FOR DE	EBTOR(S)
	compensation paid to me within one year	Bankr. P. 2016(b), I certify that I am the attorney is before the filing of the petition in bankruptcy, or contemplation of or in connection with the bankruptcy.	agreed to be paid	to me, for services rendered or to
	For legal services, I have agreed to a	ccept	\$	1,200.00
	Prior to the filing of this statement I	have received	\$	1,200.00
	Balance Due		\$	0.00
2.	The source of the compensation paid to n	e was:		
	■ Debtor □ Other (specify	y):		
3.	The source of compensation to be paid to	me is:		
	■ Debtor □ Other (specif	y):		
4.	■ I have not agreed to share the above-	lisclosed compensation with any other person unle	ess they are memb	bers and associates of my law firm.
		osed compensation with a person or persons who a list of the names of the people sharing in the cor		
5.	In return for the above-disclosed fee, I ha	ve agreed to render legal service for all aspects of	f the bankruptcy c	case, including:
	b. Preparation and filing of any petition,	tion, and rendering advice to the debtor in determ schedules, statement of affairs and plan which ma eting of creditors and confirmation hearing, and a	y be required;	
6.	By agreement with the debtor(s), the above	re-disclosed fee does not include the following ser	rvice:	
		CERTIFICATION		
	I certify that the foregoing is a complete spankruptcy proceeding.	tatement of any agreement or arrangement for pay	yment to me for re	epresentation of the debtor(s) in
		/s/ C David Ward		
	Date	C David Ward		
		Signature of Attorney C. David Ward		
		1480 N. Orchard Rd.	Ste. 110	
		Aurora, IL 60506 (630) 585-3164 Fax:	620-551-7121	
		cdward1945@yahoo		
		Name of law firm		

CHAPTER 7 BANKRUPTCY RETAINER AGREEMENT

You have asked our firm to act as your attorneys. This agreement sets forth the terms under which we will represent you and shall become effective as soon as it is signed by both of us and we are paid as set forth herein. We reserve the right to terminate our attorney client relationship for non-payment of fees or costs and or the failure to provide the documents requests in a timely fashion. We do not advance any costs or expenses

COSTS AND EXPENSES. The following are the anticipated costs and expenses which may be

incurred	d in your ca	ase: The case can not be filed without these fees being paid.	26600	
	A. •	COURT COSTS: Initial filing fee to clerk of court		
	В. •	CREDIT REPORT:	- 78	
II.	124 A TO 121	FF. The estamper in the short will also used to	347	
11.		EE. The attorney's fee that will charged for your 7 bankruptcy will be	1200	•
	Chapter	7 Odniki upicy will be	- or	
III.	TOTAL	DUE	1847	
**1.	IVIAL	DOL .		
IV.	PAYME	NT. We will expect the following payments:	1.	
	A.]	PRELIMINARY MEETING. There is no charge for the fir	st half Your meeting	
	B. 1	FIRST PAYMENT. If you wish to proceed, the credit repor	t fee of and the	
	i	first legal fee payment of \$750.00 for a total of	will have to be paid	
	C. 5	SECOND PAYMENT. The second payment of attorney's fe	es of \$750 00 must be paid	
		prior to filing the bankruptcy case.	ses et v. 50.00 must ee paid	Λ
	D. 7	THIRD PAYMENT. The third payment of attorney's fees o	f \$500.00 and the filing fee	
	(of \$299 for a total of \$799.00 will have to be paid prior to our	filing the bankruptcy case	
	E.	ADDITIONAL CHARGES. All additional charges will have	e to be paid as agreed.	/ 1 N
		-		1/.NY
V.	PRIVAC	Y WAIVER. Many of the documents we will require and m	such of the information and	1/1
due dilig	gence we v	vill have to complete will require our investigation into your	personal financial records	$\mathbb{N} \cup \mathbb{N}$
and all o	other venue	es of public data. This could include the Secretary of State, the	ne Criminal Court records,	
the Civi	Il Court rec	ords, the tax assessor's records, and all other sources of infor	mation that may be	V = XX
availabi	e through t	he internet (including IRS, IDOR, and census bureau) and off	her public sources of	v ./_v\
miorma	ilion. Said	information will be used solely on your behalf and as is necessary	ssary to adequately	リク
represer	it you in in	e bankruptcy proceedings filed on your behalf. Should we no	ot represent you said	1'.
niioima	HOH WHI IK	ot be disclosed to any other person without your permission u	nless ordered to do so by a	, W
COURT WI	im jurisaici	tion. Once this information is received we will have to include	le it in the paperwork	∧
necessar	ry to comp	lete the bankruptcy process on your behalf. You hereby authorisin from any course available and find the	orize us to obtain the	U'
nermice	ione roquir	tion from any source available and further agree to execute an ed by any third party providers of this information.	ly necessary waiver and or	1
permissi	ions requir	ed by any unite party providers of this information.		,}
VI.	WE UND	ERSTAND THAT THE CASE WILL NOT FILED UNL	FCC WE DROWING THE	$\sim 10^{10}$
-	RED DOL	UMENTATION ON TIME AND MAKE THE PAYMENT	ESS WE PROVIDE THE	()()
TIME.	SAID FA	ILURE TO FILE MAY DEPRIVE US OF THE PROTEC	TION OF THE	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
BANKI	RUPTCY S	SYSTEM AND COULD ADVERSELY AFFECT US.	TION OF THE	\1 N
		STEAT CONTROL OF THE SECTION OF THE		\
VII.	WE UND	ERSTAND THAT THE EXECUTION OF THIS AGREE	EMENT DOES NOT	V (
GUAR	ANTEE TI	HAT WE QUALIFY FOR A CHAPTER 7 BANKRUPTO	Y. NO	\ '
REPRE	SENTATI	ION AS TO WHICH CHAPTER WE QUALIFY FOR IS	BEING MADE UNTIL	10
THE M	EANS TE	ST CALCULATION IS COMPLETED.		X
	5/11	1/1/		
Dated:_	<u> </u>	$\frac{77}{2}$,	\mathcal{A}
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		men areas	- 110-X	
C. David	d Ward and	I Illini Legal Services:	V	

Document Program 49 of 53

BANKRUPTCY RETAINER AGREEMENT

You have asked our firm to act as your attorneys. This agreement sets forth the terms under which we will represent you and shall become effective as soon as it is signed by both of us and we are paid as set forth herein. We reserve the right to terminate our attorney client relationship for non-payment of fees or costs and or the failure to provide the documents requests in a timely fashion. We do not advance any costs or expenses

I. <u>COSTS AND EXPENSES</u>. The following are the anticipated costs and expenses which may be incurred in your case: The case can not be filed without these fees being paid.

A. COURT COSTS: Initial filing fee to clerk of court (\$235.00)

B. CREDIT REPORT:

II. <u>FLAT FEE</u>. The attorney's fee that will charged for your Chapter 7 bankruptcy will be

Deel 690

\$33.00 \$53.00

III. TOTAL DUE.

- IV. PRIVACY WAIVER. Many of the documents we will require and much of the information and due diligence we will have to complete will require our investigation into your personal financial records and all other venues of public data. This could include the Secretary of State, the Criminal Court records, the Civil Court records, the tax assessor's records, and all other sources of information that may be available through the internet (including IRS, IDOR, and census bureau) and other public sources of information. Said information will be used solely on your behalf and as is necessary to adequately represent you in the bankruptcy proceedings filed on your behalf. Should we not represent you said information will not be disclosed to any other person without your permission unless ordered to do so by a court with jurisdiction. Once this information is received we will have to include it in the paperwork necessary to complete the bankruptcy process on your behalf. You hereby authorize us to obtain the necessary information from any source available and further agree to execute any necessary waiver and or permissions required by any third party providers of this information.
- V. WE UNDERSTAND THAT THE CASE WILL NOT FILED UNLESS WE PROVIDE THE REQUIRED DOUMENTATION ON TIME AND MAKE THE PAYMENTS AGREED TO ON TIME. SAID FAILURE TO FILE MAY DEPRIVE US OF THE PROTECTION OF THE BANKRUPTCY SYSTEM AND COULD ADVERSELY AFFECT US.
- VI. WE UNDERSTAND THAT THE EXECUTION OF THIS AGREEMENT DOES NOT GUARANTEE THAT WE QUALIFY FOR A CHAPTER 7 BANKRUPTCY. NO REPRESENTATION AS TO WHICH CHAPTER WE QUALIFY FOR IS BEING MADE UNTIL THE MEANS TEST CALCULATION IS COMPLETED AND OTHER QUALIFICATIONS FACTORS ARE MET.

Dated: Z -9-16		
ILLINI LEGAL SERVICES:	- Oll Warts	<i>/</i> /\
	Plubih	
		418

- VII. WHAT WE WILL DO FOR YOU. Illini Legal Services will provide legal and other services as follow:

 A. PEOPLE INVOLVED. The full bankruptcy process involved many skilled people who work on various stages of your case. Some of the people involved are:
- 1. ATTORNEY. The Attorneys at Illini Legal Services will provide over sight in all aspects of your case, meet with you as is necessary and attend those creditors meeting and court appearances as are agreed. Should legal fees be charges the current hourly rate is \$360.00 per hour.
- 2. PARALEGAL. Illini Legal Services uses the services of paralegals. Paralegals are highly skilled non-attorneys who provide specialized support services. Paralegals are supervised by Attorneys and provide the support services to facilitate the document preparation, information gathering, and other essential tasks necessary in the orderly completion of your Bankruptcy. Should fees be charged they will be \$180.00 per hour.
- 3. SECRETARIAL AND OTHER SUPPORT. Other people are also engaged in helping your successful trip through the bankruptcy process. These include secretaries, and other services. There is no separate hourly charge for these services and their costs are included in the hourly fees charged by Illini Legal Services.
- B. **SERVICES PROVIDED**. Once you have become our client we will provide among other services the following:
- 1. EXPLANATION OF BANKRUPTCY. We will explain the bankruptcy process and the difference between the types of bankruptcy to you so that you can make a reasoned decision as to what you want to do.
- 2. NECESSARY PAPERWORK. We will provide all of the paper work necessary for you to complete the bankruptcy process. This includes the following:
- 3. CREDITOR'S MEETING. In both Chapter 7 and Chapter 13 there is a mandatory meeting with the bankruptcy trustee know as the 341 meeting. We will prepare for and attend this meeting with you.
- 4. COURT APPEARANCES. If there are necessary court appearances we will prepare for and attend them.
- a. Mundane Court Appearances. Mundane court appearances are routine court matters. They are held on court motion calls. Said mundane matters do not include set evidentiary hearings, adversary proceedings, and or other contested matters of an unusual nature.
- b. Adversary Proceedings and highly contested Court Appearances. Adversary Proceedings and highly contested Court Appearances are not included in the fee quoted above and there will be extra charges which will be discussed with you prior to the attendance of any court appearance. In most instances additional legal fees will have to be agreed to and paid.
- 5. AMENDMENTS OF SCHEDULES. We will prepare and file on your behalf any necessary amendments to the paperwork. There may be an additional costs for this service with the court system which your will have to pay prior to the amendments.
- VIII. WHAT WE WILL NOT DO FOR YOU. Without further agreement between Illini and you, there are several things that Illini has not agreed to do. These include:
- A. ADVERSE PROCEEDINGS. Should any person, creditor, and or the trustee, initiate a lawsuit against you in the bankruptcy proceeding, (this is called an adversary proceeding) we have not agreed to represent you. Should this happen there will be additional fees, costs and expenses which we will have to agree to and will have to be paid. If we cannot come to an agreement we will withdraw as your attorney.
- B. ACTIONS CAUSED BY YOUR FAILURE TO LIVE UP TO YOUR AGREED RESPONSIBILITIES. Should you fail to do any of those things you have agreed to do as set forth in this agreement we have not agreed to represent you. Should this happen there will be additional fees, costs and expenses which we will have to agree to and will have to be paid. If we cannot come to an agreement we will withdraw as your attorney.
- IX. WHAT YOU MUST DO FOR US. It is immensely important that we have your complete cooperation. All items must be paid, in advance, to Illini and a failure to pay same will result in our withdrawal from your case and may cause documents which must be filed in a timely fashion to be filed late or not all. We are not responsible for the consequences of your failure to get to us the information, whether written, or otherwise, in a timely fashion nor will we represent you in any of the proceedings occasioned by your failure, without further agreement about the representation and the payment of expenses, costs and fees. We cannot do our job for you unless we have the information to be able to deal with in a timely fashion. Not limiting the above, you must do the following:
 - A. ATTEND THE CREDITOR'S MEETING AND ALL COURT PROCEEDINGS ON TIME.
 - B. PROVIDE ALL DOUMENTRATION REQUESTED TO US WHEN WE REQUEST IT.
 - C. LET US KNOW OF ANY CHANGES IN YOUR CIRCUMSTANCES AS THEY MAY OCCUR.
 - E. COOPERATE IN A TIMELY FASHION WITH THIRD PARTIES NECESSARY TO THE SUCCESSFUL COMPLETTION OF YOUR CASE

- VIII. WHAT WE WILL DO FOR YOU. Attorney C. David Ward doing business as Illini Legal Services will provide legal and other services as follow:
- A. **PEOPLE INVOLVED.** The full bankruptcy process involved many skilled people who work on various stages of your case. Some of the people involved are:
- 1. ATTORNEY. Attorney Ward and other attorneys affiliated with Illini Legal Services will provide over sight in all aspects of your case; meet with you as is necessary and attend those creditors meeting and court appearances as are agreed. Attorney Ward's normal billing rate is \$275.00 per hour. Billings do include time in or out of office, travel time, waiting for proceedings, telephone call and other necessary time expenditures.
- 2. PARALEGAL. Illini Legal Services and Attorney Ward use the services of paralegals. Paralegals are highly skilled non-attorneys who provide specialized support services. As such the hourly rate for paralegals is \$125.00 per hour. Paralegals are supervised by Attorney Ward and provide the support services to facilitate the document preparation, information gathering, and other essential tasks necessary in the orderly completion of your Bankruptcy.
- 3. SECRETARIAL AND OTHER SUPPORT. Other people are also engaged in helping your successful trip through the bankruptcy process. These include secretaries, and other services. There is no separate hourly charge for these services and their costs are included in the hourly fees charged by Attorney Ward.
- B. **SERVICES PROVIDED.** Once you have become our client we will provide among other services the following:
- EXPLANATION OF BANKRUPTCY. We will explain the bankruptcy process and the difference between the types of bankruptcy to you so that you can make a reasoned decision as to what you want to do.
- 2. NECESSARY PAPERWORK. We will provide all of the paper work necessary for you to complete the bankruptcy process. This includes the following:
- 3. CREDITOR'S MEETING. In both Chapter 7 and Chapter 13 there is a mandatory meeting with the bankruptcy trustee know as the 341 meeting. We will prepare for and attend this meeting with you.

 4. COURT APPEARANCES. If there are necessary court appearances we will prepare for

and attend them.

- a. Mundane Court Appearances. Mundane court appearances are routine court matters. They are held on court motion calls. Said mundane do not include set evidentiary hearings, adversary proceedings, and or other contested matters of an unusual nature.
- b. Adversary Proceedings and highly contested Court Appearances. Adversary Proceedings and highly contested Court Appearances are not included in the fee quoted above and there will be extra charges which will be discussed with you prior to the attendance of any court appearance. In most instances additional legal fees will have to be agreed to and paid.
- 5. AMENDMENTS OF SCHEDULES. We will prepare and file on your behalf any necessary amendments to the paperwork. There may be an additional costs for this service with the court system which your will have to pay prior to the amendments.
- IX. WHAT WE WILL NOT DO FOR YOU. Without further agreement between Attorney Ward and you, there are several things that Attorney Ward has not agreed to do. These include;
- A. ADVERSE PROCEEDINGS. Should any person, creditor, and or the trustee, initiate a lawsuit against you in the bankruptcy proceeding, (this is called an adversary proceeding) we have not agreed to represent you. Should this happen there will be additional fees, costs and expenses which we will have to agree to and will have to be paid. If we cannot come to an agreement we will withdraw as your attorney.
- B. ACTIONS CAUSED BY YOUR FAILURE TO LIVE UP TO YOUR AGREED RESPONSIBILITIES. Should you fail to do any of those things you have agreed to do as set forth in this agreement we have not agreed to represent you. Should this happen there will be additional fees, costs and expenses which we will have to agree to and will have to be paid. If we cannot come to an agreement we will withdraw as your attorney.
- X. WHAT YOU MUST DO FOR US. It is immensely important that we have your complete cooperation. All items must be paid, normally in advance, to Attorney Ward and a failure to pay same will result in our withdrawal from your case and may cause documents which must be filed in a timely fashion to be filed late or not all. We are not responsible for the consequences of your failure to get to us the information, whether written, or otherwise, in a timely fashion nor will we represent you in any of the proceedings occasioned by your failure, without further agreement about the representation and the payment of expenses, costs and fees. We cannot do our job for you unless we have the information to be able to deal with in a timely fashion. Not limiting the above, you must do the following:
 - A. ATTEND THE CREDITOR'S MEETING AND ALL COURT PROCEEDINGS ON TIME.
 - B. PROVIDE ALL DOUMENTRATION REQUESTED TO US WHEN WE REQUEST IT.
 - C. LET US KNOW OF ANY CHANGES IN YOUR CIRSUMSTANCES AS THEY MAY OCCUR.
 - E. COOPERATE IN A TIMELY FASHION WITH THIRD PARTIES NECESSARY TO THE SUCCESSFUL COMPLETTION OF YOUR CASE

United States Bankruptcy Court Northern District of Illinois

Northern District of Innois						
In re	Lilibeth Hernandez		Case No.			
		Debtor(s)	Chapter 7			
	VERII	FICATION OF CREDITOR M	IATRIX			
		Number of	Creditors:	9		
	The above-named Debtor(s) her (our) knowledge.	reby verifies that the list of credi	tors is true and correct to t	he best of my		
Date:		/s/ Lilibeth Hernandez				
		Lilibeth Hernandez				
		Signature of Debtor				

Atg Credit 1700 W Cortland St Ste 2 Chicago, IL 60622

Cda/pontiac Attn:Bankruptcy Po Box 213 Streator, IL 61364

Credit Collections Svc Po Box 773 Needham, MA 02494

Diversified Svs Group Attention: Bankruptcy Department 1824 W Grand Ave - Suite 200 Chicago, IL 60622

Ecmc 1 Imation Place Bldg 2 Oakdale, MN 55128

Markoff Law LLC 29 N. Wacker Dr., #550 Chicago, IL 60606

Navient Attn: Claims Dept Po Box 9500 Wilkes-Barr, PA 18773

Northstar Location Services 428 Genesee St. Cheektowaga, NY 14225-1943

Transworld Systems 507 Prudential Rd. Horsham, PA 19044